24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
House Majority PAC	
	C C00495028
Check if 24-hour report X 48-hour report New report Amends report filed	on M M / D D / Y Y Y Y Y
Full Name of Payee	Date of Public Distribution/Dissemination
Aerial Messages	M M / D D / Y Y Y Y
Mailing Address 1500 Beville Rd	07 03 2016 Amount
Ste 606-208	
City State Zip Code	5365.95
Daytona Beach FL 32114-5646	Transaction ID: VN7GDA1E3M4 Date of Disbursement or Obligation
Purpose of Expenditure Aerial Advertising - Estimate Category/ Type	M = M / D = D / Y = Y = Y
Name of Federal Candidate Support Office	e Sought: X House District: 05
Scott Garrett Oppose	President Senate State: NJ
Calendar Year-To-Date Per Election for Office Sought Disbut 2016	orsement For: Primary
Full Name of Payee	Date of Public Distribution/Dissemination
	M M / D D / Y Y Y Y
Mailing Address	
	Amount
City State Zip Code	
Purpose of Expenditure	Date of Disbursement or Obligation
Category/ Type	, , , , , , , , , , , , , , , , , , , ,
Name of Federal Candidate Support Office	e Sought: House District:
Oppose	President Senate State:
Calendar Year-To-Date Disbu	ursement For: Primary General
Per Election for Office Sought	Other (specify)
-	
(a) SUBTOTAL of Itemized Independent Expenditures	5365.95
(b) SUBTOTAL of Unitemized Independent Expenditures	7 7 7
(c) TOTAL Independent Expenditures	
(b) 101A2 masperiatin Experiation	5365.95
Under penalty of perjury I certify that the independent expenditures reported herein were not may with, or at the request or suggestion of, any candidate or authorized committee or agent of eithe party committee) any political party committee or its agent.	
Alixandria Lapp	M / D D / Y T Y T Y
[Electronically Filed] Date 0	7 05 2016
Signature	